

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

2005

Note: The organization may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2005, or tax year beginning

, and ending

☒ Check all that apply: ☐ Initial return ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type See Specific Instructions

Name of organization

ROSE-MARIE AND JACK R. ANDERSON
FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

16475 DALLAS PARKWAY

Room/suite

735

City or town, state, and ZIP code

ADDISON, TX 75001

A Employer identification number

75-2542403

B Telephone number

(972) 248-7350

H Check type of organization:

☒

Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)

\$ 49,784,261. (Part I, column (d) must be on cash basis)

J Accounting method:

☒

Cash

☐

Accrual

☐ Other (specify)C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐**Part I Analysis of Revenue and Expenses**

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	3,220,790.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	52,619.	52,619.		STATEMENT 2
4 Dividends and interest from securities	1,195,115.	1,195,115.		STATEMENT 3
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	1,733,999.			STATEMENT 1
b Gross sales price for all assets on line 6a	10,495,140.			
7 Capital gain net income (from Part IV, line 2)		6,180,370.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	<6,212.>	<6,212.>		STATEMENT 4
12 Total. Add lines 1 through 11	6,196,311.	7,421,892.		
13 Compensation of officers, directors, trustees, etc	63,000.	15,750.		47,250.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees	3,400.	850.		2,550.
c Other professional fees	33,000.	8,250.		24,750.
17 Interest	2,211.	2,211.		0.
18 Taxes	44,769.	0.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and public relations				
23 Other expenses	156.	140.		6.
24 Total operating and administrative expenses. Add lines 13 through 23	146,536.	27,201.		74,556.
25 Contributions, gifts, grants paid	1,968,000.			1,968,000.
26 Total expenses and disbursements. Add lines 24 and 25	2,114,536.	27,201.		2,042,556.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	4,081,775.			
b Net investment income (if negative, enter -0-)		7,394,691.		
c Adjusted net income (if negative, enter -0-)			N/A	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 990-PF (2005)

ROSE-MARIE AND JACK R. ANDERSON
FOUNDATION

75-2542403

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		5,557,467.	4,039,092.	4,039,092.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations STMT 10		16,400,282.	19,239,272.	18,907,100.
	b	Investments - corporate stock STMT 11		17,224,277.	19,962,795.	25,684,847.
	c	Investments - corporate bonds				
11	Investments - land, buildings, and equipment basis ▶					
	Less: accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other					
14	Land, buildings, and equipment: basis ▶	24,833.				
	Less: accumulated depreciation STMT 12 ▶	24,833.				
15	Other assets (describe ▶ STATEMENT 13)		1,132,137.	1,154,779.	1,153,222.	
16	Total assets (to be completed by all filers)		40,314,163.	44,395,938.	49,784,261.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ▶ <input type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Organizations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds		0.	0.	
	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
29	Retained earnings, accumulated income, endowment, or other funds		40,314,163.	44,395,938.		
30	Total net assets or fund balances		40,314,163.	44,395,938.		
31	Total liabilities and net assets/fund balances		40,314,163.	44,395,938.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	40,314,163.
2	Enter amount from Part I, line 27a	2	4,081,775.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	44,395,938.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	44,395,938.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b SEE ATTACHED STATEMENTS				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e 10,495,140.		4,314,770.	6,180,370.	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
a				
b				
c				
d				
e			6,180,370.	
2 Capital gain net income or (net capital loss). { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	6,180,370.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the organization liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the organization does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2004	1,725,051.	40,263,433.	.042844
2003	1,750,847.	37,460,116.	.046739
2002	1,783,573.	35,487,368.	.050259
2001	1,826,672.	35,668,342.	.051213
2000	1,944,325.	37,086,480.	.052427
2 Total of line 1, column (d)			2 .243482
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 .048696
4 Enter the net value of noncharitable-use assets for 2005 from Part X, line 5			4 45,094,653.
5 Multiply line 4 by line 3			5 2,195,929.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 73,947.
7 Add lines 5 and 6			7 2,269,876.
8 Enter qualifying distributions from Part XII, line 4			8 2,042,556.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling letter: _____ (attach copy of ruling letter if necessary-see instructions)		1	147,894.
b Domestic organizations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c All other domestic organizations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		3	147,894.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	147,894.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2005 estimated tax payments and 2004 overpayment credited to 2005	6a 41,000.		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c 125,000.		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	166,000.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		8	3,301.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	14,805.
11 Enter the amount of line 10 to be: Credited to 2006 estimated tax 14,805. Refunded		11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the organization attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the organization in connection with the activities		X
c Did the organization file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the organization. \$ 0. (2) On organization managers. \$ 0.		
e Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on organization managers. \$ 0.		
2 Has the organization engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the organization have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) TX		
b If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2005 or the taxable year beginning in 2005 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 Did the organization comply with the public inspection requirements for its annual returns and exemption application? Web site address N/A	X	
12 The books are in care of NEIL R. ANDERSON Telephone no. 972-248-7350 Located at 16475 DALLAS PARKWAY, SUITE 735, ADDISON, TX ZIP+4 75001		
13 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year		N/A

Part VIII**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		63,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	42,692,753.
b Average of monthly cash balances	1b	3,082,388.
c Fair market value of all other assets	1c	6,233.
d Total (add lines 1a, b, and c)	1d	45,781,374.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	45,781,374.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	686,721.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	45,094,653.
6 Minimum investment return. Enter 5% of line 5	6	2,254,733.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	2,254,733.
2a Tax on investment income for 2005 from Part VI, line 5	2a	147,894.
b Income tax for 2005. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	147,894.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	2,106,839.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	2,106,839.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,106,839.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,042,556.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,042,556.
5 Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,042,556.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2004	(c) 2004	(d) 2005
1 Distributable amount for 2005 from Part XI, line 7				2,106,839.
2 Undistributed income, if any, as of the end of 2004				
a Enter amount for 2004 only			1,969,067.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2005:				
a From 2000				
b From 2001				
c From 2002				
d From 2003				
e From 2004				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2005 from Part XII, line 4: ► \$ 2,042,556.				
a Applied to 2004, but not more than line 2a			1,969,067.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2005 distributable amount				73,489.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2005 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2004. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2005. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2006				2,033,350.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2000 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2006 Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2001				
b Excess from 2002				
c Excess from 2003				
d Excess from 2004				
e Excess from 2005				

N/A

- b Check box to indicate whether the organization is a private operating foundation described in section

☐ 4942(i)(3) or ☐ 4942(i)(5)

- b 85% of line 2a**

- c** Qualifying distributions from Part XII,
line 4 for each year listed

- d** Amounts included in line 2c not used directly for active conduct of exempt activities

- e** Qualifying distributions made directly for active conduct of exempt activities.

Subtract line 2d from line 2c

- 3 Complete 3a, b, or c for the alternative test relied upon:

- a "Assets" alternative test - enter:
(1) Value of all assets

- (2) Value of assets qualifying under section 4942(i)(3)(B)(i)**

- b** "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

- c "Support" alternative test - enter:

- (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

- (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

- (3) Largest amount of support from an exempt organization**

- (4) Gross investment income**

Part XV **Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year-see page 26 of the instructions.)**

1 Information Regarding Foundation Managers:

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SEE STATEMENT 15

- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the organization only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the organization makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number of the person to whom applications should be addressed:

N/A

- b The form in which applications should be submitted and information and materials they should include:**

N/A

- c Any submission deadlines:

N/A

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE ATTACHED SCHEDULE				1,968,000.
Total			▶ 3a	1,968,000.
b Approved for future payment NONE				
Total			▶ 3b	0.

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income	
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1 Program service revenue:							
a _____							
b _____							
c _____							
d _____							
e _____							
f _____							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments				14	52,619.		
4 Dividends and interest from securities				14	1,195,115.		
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal property							
7 Other investment income				14	<6,212.>		
8 Gain or (loss) from sales of assets other than inventory				18	1,733,999.		
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a _____							
b _____							
c _____							
d _____							
e _____							
12 Subtotal. Add columns (b), (d), and (e)			0.		2,975,521.	0.	
13 Total. Add line 12, columns (b), (d), and (e)						13 2,975,521.	

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
------------------	--

- | | | | | |
|---|--|-------|-----|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a | Transfers from the reporting organization to a noncharitable exempt organization of: | | | |
| | (1) Cash | 1a(1) | | X |
| | (2) Other assets | 1a(2) | | X |
| b | Other transactions: | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| | (4) Reimbursement arrangements | 1b(4) | | X |
| | (5) Loans or loan guarantees | 1b(5) | | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

- 2a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer or trustee

Date _____

Title

Preparer's
signature

Firm's name (or yours if self-employed),
address, and ZIP code

Ira Newell

WEAVER AND TIDWELL, L.L.P.
12221 MERIT DRIVE, SUITE 1400
DALLAS, TEXAS 75251

Date _____

11/1/06

☐ Check if self-employed

Preparer's SSN or PTIN

EIN ▶

Phone no. (972) 490-1970

Form **990-PF** (2005)

Schedule B
(Form 990, 990-EZ, or
990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No 1545-0047

2005

Name of organization

ROSE-MARIE AND JACK R. ANDERSON
FOUNDATION

Employer identification number

75-2542403

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐

501(c)() (enter number) organization

☐

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

General Rule-

- ☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules-

- ☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions
for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2005)

Name of organization
**ROSE-MARIE AND JACK R. ANDERSON
 FOUNDATION**

Employer identification number

75-2542403**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	<u>MR. & MRS. JACK R. ANDERSON</u> <u>16475 DALLAS PARKWAY, SUITE 735</u> <u>ADDISON, TX 75001</u>	\$ <u>3,220,790.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Employer identification number

75-2542403

[illegible]

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 14.23 SH ML S&P INDEX		P	07/30/04	07/07/05
b 1,269.22 SH ML S&P INDEX		P	12/23/04	07/07/05
c 93,196.146 SH ML S&P INDEX		P	01/22/03	07/07/05
d 31.858 SH ML S&P INDEX		P	07/23/03	07/07/05
e 937.12 SH ML S&P INDEX		P	12/24/03	07/07/05
f REDEMPTION OF 06/05 TVA 6.375%		P	02/27/01	06/15/05
g REDEMPTION OF 12/05 FNMA 6%		P	08/25/03	11/29/05
h REDEMPTION OF 02/05 FHLB 5.92%		P	02/20/98	02/02/05
i 24,942 SH PHSY		D	08/17/99	01/21/05
j 95,058 SH PHSY		D	VARIOUS	01/21/05
k FROM K-1 SF SENTRY - SECTION 1256 LOSS		P	VARIOUS	12/31/05
l FROM K-1 SF SENTRY - SECTION 1256 LOSS		P	VARIOUS	12/31/05
m FROM K-1 SF SENTRY - SHORT TERM CAP LOSS		P	VARIOUS	12/31/05
n FROM K-1 SF SENTRY - LONG TERM CAP GAIN		P	VARIOUS	12/31/05
o 159,100 SH PACIFICARE HEALTH -CASH DISTRIBUTION		D	VARIOUS	12/20/05

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 210.		192.	18.
b 18,721.		18,518.	203.
c 1,374,638.		1,000,000.	374,638.
d 470.		384.	86.
e 13,822.		12,492.	1,330.
f 1,000,000.		1,042,816.	<42,816.>
g 1,000,435.		1,089,554.	<89,119.>
h 1,000,000.		1,011,255.	<11,255.>
i 490,137.		22,176.	467,961.
j 2,152,504.		85,946.	2,066,558.
k		1,210.	<1,210.>
l		1,815.	<1,815.>
m		28,412.	<28,412.>
n 23,553.			23,553.
o 3,420,650.			3,420,650.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			18.
b			203.
c			374,638.
d			86.
e			1,330.
f			<42,816.>
g			<89,119.>
h			<11,255.>
i			467,961.
j			2,066,558.
k			<1,210.>
l			<1,815.>
m			<28,412.>
n			23,553.
o			3,420,650.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	6,180,370.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 }	3	N/A

2005 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No	Description	Date Acquired			Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	ORGANIZATIONAL COSTS	06	13	94	248	60M	43	22,864.			22,864.	22,864.		0.
2	OFFICE EQUIPMENT	04	15	99	200DB	5.00	17	985.			985.	985.		0.
3	OFFICE EQUIPMENT	06	15	99	200DB	5.00	17	984.			984.	984.		0.
	* TOTAL 990-PF PG 1 DEPR & AMORT							24,833.		0.	24,833.	24,833.	0.	0.

FORM 990-PF

GAIN OR (LOSS) FROM SALE OF ASSETS

STATEMENT 1

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
14.23 SH ML S&P INDEX	PURCHASED	07/30/04	07/07/05	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
210.	192.	0.	0.	18.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
1,269.22 SH ML S&P INDEX	PURCHASED	12/23/04	07/07/05	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
18,721.	18,518.	0.	0.	203.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
93,196.146 SH ML S&P INDEX	PURCHASED	01/22/03	07/07/05	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
1,374,638.	1,000,000.	0.	0.	374,638.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
31.858 SH ML S&P INDEX	470.	384.	0.	0.	86.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
937.12 SH ML S&P INDEX	13,822.	12,492.	0.	0.	1,330.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
REDEMPTION OF 06/05 TVA 6.375%	1,000,000.	1,042,816.	0.	0.	<42,816.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
REDEMPTION OF 12/05 FNMA 6%	1,000,435.	1,089,554.	0.	0.	<89,119.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
REDEMPTION OF 02/05 FHLB 5.92%	1,000,000.	1,011,255.	0.	0.	<11,255.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
24,942 SH PHSY	490,137.	354,987.	0.	0.	135,150.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
95,058 SH PHSY	2,152,504.	4,199,506.	0.	0.	<2,047,002.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
FROM K-1 SF SENTRY - SECTION 1256 LOSS	0.	1,210.	0.	0.	<1,210.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
FROM K-1 SF SENTRY - SECTION 1256 LOSS	0.	1,815.	0.	0.	<1,815.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
FROM K-1 SF SENTRY - SHORT TERM CAP LOSS	0.	28,412.	0.	0.	<28,412.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
FROM K-1 SF SENTRY - LONG TERM CAP GAIN	23,553.	0.	0.	0.	23,553.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
159,100 SH PACIFICARE HEALTH -CASH DISTRIBUTION	3,420,650.	0.	0.	0.	3,420,650.

CAPITAL GAINS DIVIDENDS FROM PART IV	0.
TOTAL TO FORM 990-PF, PART I, LINE 6A	1,733,999.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2

SOURCE	AMOUNT
MERRILL LYNCH	52,619.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	52,619.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 3

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
FROM K-1 - NGN BIOMED OPPOR I	677.	0.	677.
FROM K-1 - SF SENTRY	2,161.	0.	2,161.
LESS PURCHASED INTEREST: 02/06 FHLB 2.5%.	<694.>	0.	<694.>
LESS PURCHASED INTEREST: 02/13 FNMA 1%.	<2,333.>	0.	<2,333.>
LESS PURCHASED INTEREST: 04/20 FHLMC 1%.	<556.>	0.	<556.>
LESS PURCHASED INTEREST: 11/06 FHLB 3%.	<3,000.>	0.	<3,000.>
MERRILL LYNCH - DIV	152,365.	0.	152,365.
MERRILL LYNCH - INT	961,314.	0.	961,314.
VANGUARD S&P 500 INDEX	85,181.	0.	85,181.
TOTAL TO FM 990-PF, PART I, LN 4	1,195,115.	0.	1,195,115.

FORM 990-PF OTHER INCOME STATEMENT 4

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FROM K-1 - SF SENTRY	<6,212.>	<6,212.>	
TOTAL TO FORM 990-PF, PART I, LINE 11	<6,212.>	<6,212.>	

FOOTNOTES

STATEMENT 9

PART I, LINES 13 AND 16C
PART VIII, LINE 1
SUPPLEMENTAL STATEMENT

THE TAXPAYER PAYS A MANAGEMENT FEE TO CALVER CORPORATION.
CALVER CORPORATION PAYS SALARY TO NEIL ANDERSON.
SEVENTY PERCENT OF NEIL'S TIME IS DEVOTED TO FOUNDATION
BUSINESS. THEREFORE, SEVENTY PERCENT OF NEIL'S SALARY IS
REPORTED ON PART 1, LINE 13 AND PART VIII, LINE 1(C). THE
REMAINING FEE TO CALVER IS REPORTED ON PART I, LINE 16C.

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 10

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
02/05 FHLB 5.92%	X		0.	0.
02/06 FHLB 6.13%	X		1,020,318.	1,002,190.
10/07 FFCB 6.8%	X		1,021,187.	1,035,310.
06/05 TVA 6.375%	X		0.	0.
01/06 FFCB 5.625%	X		1,007,343.	1,000,630.
08/07 FHLB 6.75%	X		1,060,580.	1,030,630.
07/08 FHLB 5.84%	X		999,981.	1,027,190.
08/08 FFCB 5.9%	X		1,035,679.	1,028,410.
07/06 FHLMC 5.5%	X		1,031,201.	1,004,690.
12/05 FNMA 6.00%	X		0.	0.
10/06 UST 6.50%	X		1,151,405.	1,015,200.
11/08 UST 4.75%	X		1,102,974.	1,009,610.
08/10 FHLMC 4.25%	X		1,000,000.	993,850.
08/18 FHLMC 4.25%	X		1,000,000.	980,810.
06/13 FHLB 3.875%	X		915,442.	942,190.
04/14 FNMA 4.125%	X		910,547.	953,440.
02/06 FHLB 2.5%	X		992,605.	996,880.
11/06 FHLB 3%	X		990,005.	985,000.
02/13 FNMA 4%	X		1,000,000.	975,940.
07/16 FNMA 5%	X		1,000,000.	968,130.
01/17 FHLMC 4.25%	X		1,000,000.	976,540.
04/20 FHLMC 5%	X		1,000,005.	980,460.
TOTAL U.S. GOVERNMENT OBLIGATIONS			19,239,272.	18,907,100.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			19,239,272.	18,907,100.

FORM 990-PF CORPORATE STOCK STATEMENT 11

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
VANGUARD S&P 500 INDEX	2,687,717.	4,866,981.
99,000 SHARES OF UNH COMMON	3,976,052.	6,151,860.
43,395 SHARES OF PROTECTIVE LIFE COMMON	1,495,500.	1,899,399.
11,000 SHARES OF UNH COMMON	52,813.	683,540.
24,942 SHARES PHSY JRMA 1988	0.	0.
PHSY \$55 CALL 1/22/05	0.	0.
PHSY \$30 CALL 1/22/05	0.	0.
PHSY \$35 CALL 1/22/05	0.	0.
M/L S&P INDEX	0.	0.
22,000 SHARES UNH JRA	1,084,900.	1,367,080.

SPY 5/2004 - 9,100 SH	1,002,553.	1,133,041.
SPY 8/2004 - 18,650 SH	2,000,406.	2,322,112.
SPY 2005	4,442,064.	4,588,193.
95,058 SHARES OF PHSY COMMON	0.	0.
UNH JRA 11/2000 - 22,000 SH	1,724,800.	1,367,080.
UNH RMA 1998 - 12,210 SH	998,390.	758,729.
UNH RMASPA 08/1999 - 8,800 SH	497,600.	546,832.
TOTAL TO FORM 990-PF, PART II, LINE 10B	19,962,795.	25,684,847.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT 12
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
ORGANIZATIONAL COSTS	22,864.	22,864.	0.
OFFICE EQUIPMENT	985.	985.	0.
OFFICE EQUIPMENT	984.	984.	0.
TOTAL TO FM 990-PF, PART II, LN 14	24,833.	24,833.	0.

FORM 990-PF	OTHER ASSETS	STATEMENT 13
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
MISCELLANEOUS RECEIVABLES	2,000.	2,000.
INVESTMENT IN SF SENTRY BALANCED EQUITY, L.P.	897,330.	897,330.
INVESTMENT IN NGN BIOMED OPPORTUNITY I, L.P.	255,449.	253,892.
TOTAL TO FORM 990-PF, PART II, LINE 15	1,154,779.	1,153,222.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 14

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT
JACK R. ANDERSON 16475 DALLAS PARKWAY, SUITE 735 ADDISON, TX 75001	DIR 3.00	0.	0. 0.
ROSE-MARIE ANDERSON 16475 DALLAS PARKWAY, SUITE 735 ADDISON, TX 75001	DIR, SECR 1.00	0.	0. 0.
NEIL R. ANDERSON 16475 DALLAS PARKWAY, SUITE 735 ADDISON, TX 75001	DIR, PRES, TR 35.00	63,000.	0. 0.
BARBARA ANDERSON MCDONALD 16475 DALLAS PARKWAY, SUITE 735 ADDISON, TX 75001	DIR, ASST SEC 1.00	0.	0. 0.
GAIL ANDERSON CANIZARES 16475 DALLAS PARKWAY, SUITE 735 ADDISON, TX 75001	DIR, ASST TR 1.00	0.	0. 0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		63,000.	0. 0.

FORM 990-PF

PART XV - LINE 1A
LIST OF FOUNDATION MANAGERS

STATEMENT 15

NAME OF MANAGER

JACK R. ANDERSON
ROSE-MARIE ANDERSON

Underpayment of Estimated Tax by Corporations▶ See separate instructions.
▶ Attach to the corporation's tax return.**FORM 990-PF****2005**Name **ROSE-MARIE AND JACK R. ANDERSON
FOUNDATION**Employer identification number
75-2542403

Note: Generally, the corporation is not required to file Form 2220. (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 34 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1 Total tax (see instructions)	1	147,894.
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or of section 167(g) for depreciation under the income forecast method	2b	
c Credit for Federal tax paid on fuels (see instructions)	2c	
d Total Add lines 2a through 2c	2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	147,894.
4 Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	23,639.
5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	23,639.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty (see instructions).

- 6** ☐ The corporation is using the adjusted seasonal installment method.
- 7** ☒ The corporation is using the annualized income installment method.
- 8** ☒ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/05	06/15/05	09/15/05	12/15/05
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column	10	5,910.	68,037.	17,243.	8,962.
11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15	11	5,000.	26,000.	5,000.	5,000.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13		26,000.	5,000.	5,000.
14 Add amounts on lines 16 and 17 of the preceding column	14		910.	42,947.	55,190.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	5,000.	25,090.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		0.	37,947.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	910.	42,947.	17,243.	8,962.
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)				
20 Number of days from due date of installment on line 9 to the date shown on line 19				
21 Number of days on line 20 after 4/15/2005 and before 10/1/2005				
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\%}{365}$	\$	\$	\$	\$
23 Number of days on line 20 after 9/30/2005 and before 4/1/2006				
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 7\%}{365}$	\$	\$	\$	\$
25 Number of days on line 20 after 3/31/2006 and before 7/1/2006				
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times \%}{365}$	\$	\$	\$	\$
27 Number of days on line 20 after 6/30/2006 and before 10/1/2006	SEE ATTACHED WORKSHEET			
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times \%}{365}$	\$	\$	\$	\$
29 Number of days on line 20 after 9/30/2006 and before 1/1/2007				
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	\$	\$	\$	\$
31 Number of days on line 20 after 12/31/2006 and before 2/16/2007				
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	\$	\$	\$	\$
33 Add lines 22, 24, 26, 28, 30, and 32	\$	\$	\$	\$
34 Penalty. Add columns (a) through (d), of line 33. Enter the total here and on Form 1120; line 33, Form 1120-A, line 29; or the comparable line for other income tax returns				34 \$ 3,301.

* For underpayments paid after March 31, 2006: For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

JWA

Form 2220 (2005)

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method (see instructions)

Form 1120S filers: For lines 1, 2, 3, and 21, below, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I - Adjusted Seasonal Installment Method (Caution: Use this method only if the base period percentage for

any 6 consecutive months is at least 70%. See instructions.)

		(a)	(b)	(c)	(d)
		First 3 months	First 5 months	First 8 months	First 11 months
1 Enter taxable income for the following periods:					
a Tax year beginning in 2002	1a				
b Tax year beginning in 2003	1b				
c Tax year beginning in 2004	1c				
2 Enter taxable income for each period for the tax year beginning in 2005.	2				
3 Enter taxable income for the following periods:		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2002	3a				
b Tax year beginning in 2003	3b				
c Tax year beginning in 2004	3c				
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a.	4				
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b.	5				
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c.	6				
7 Add lines 4 through 6.	7				
8 Divide line 7 by 3.	8				
9 Divide line 2 by line 8.	9				
10 Figure the tax on the amt on ln 9 using the instr for Form 1120, Sch J, ln 3 (or comparable ln of corp's return).	10				
11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a.	11a				
b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b.	11b				
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c.	11c				
12 Add lines 11a through 11c.	12				
13 Divide line 12 by 3.	13				
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d).	14				
15 Enter any alternative minimum tax for each payment period (see instructions).	15				
16 Enter any other taxes for each payment period (see instr)	16				
17 Add lines 14 through 16.	17				
18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c (see instructions).	18				
19 Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0-.	19				

Part II - Annualized Income Installment Method * *

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
20 Annualization periods (see instructions).	20				
21 Enter taxable income for each annualization period (see instructions).	21	2,802,955.	2,825,817.	3,039,677.	3,755,685.
22 Annualization amounts (see instructions).	22	6.000000	4.000000	2.000000	1.333333
23 Annualized taxable income. Multiply line 21 by line 22.	23	16,817,730.	11,303,268.	6,079,354.	5,007,579.
24 Figure the tax on the amount on line 23 using the instructions for Form 1120, Schedule J, line 3 (or comparable line of corporation's return).	24	336,355.	226,065.	121,587.	100,152.
25 Enter any alternative minimum tax for each payment period (see instructions).	25				
26 Enter any other taxes for each payment period (see instr)	26				
27 Total tax. Add lines 24 through 26.	27	336,355.	226,065.	121,587.	100,152.
28 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c (see instructions).	28				
29 Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-.	29	336,355.	226,065.	121,587.	100,152.
30 Applicable percentage.	30	25%	50%	75%	100%
31 Multiply line 29 by line 30.	31	84,089.	113,033.	91,190.	100,152.

Part III - Required Installments

Note: Complete lines 32 through 38 of one column before completing the next column.		1st installment	2nd installment	3rd installment	4th installment
32 If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each column from line 19 or line 31.	32	84,089.	113,033.	91,190.	100,152.
33 Add the amounts in all preceding columns of line 38 (see instructions).	33		5,910.	73,947.	91,190.
34 Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-.	34	84,089.	107,123.	17,243.	8,962.
35 Enter 25% of line 5 on page 1 of Form 2220 in each column. (Note: "Large corporations," see the instructions for line 10 for the amounts to enter.)	35	5,910.	68,037.	36,974.	36,973.
36 Subtract line 38 of the preceding column from line 37 of the preceding column.	36				19,731.
37 Add lines 35 and 36.	37	5,910.	68,037.	36,974.	56,704.
38 Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. (see instructions).	38	5,910.	68,037.	17,243.	8,962.

JWA

Form 2220 (2005)

* * ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

**FORM 990-PF
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s) ROSE-MARIE AND JACK R. ANDERSON FOUNDATION				Identifying Number 75-2542403	
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/05	5,910.	5,910.			
05/15/05	<5,000.>	910.	8	.000164384	1.
05/23/05	<26,000.>	<25,090.>			
06/15/05	68,037.	42,947.	90	.000164384	635.
09/13/05	<5,000.>	37,947.	2	.000164384	12.
09/15/05	17,243.	55,190.	15	.000164384	136.
09/30/05	0.	55,190.	76	.000191781	804.
12/15/05	8,962.	64,152.			
12/15/05	<5,000.>	59,152.	151	.000191781	1,713.
Penalty Due (Sum of Column F).					3,301.

* Date of estimated tax payment, withholding credit date or installment due date.

FORM 8688

EXPLANATION FOR EXTENSION

STATEMENT 16

EXPLANATION

TO DATE, THE DATA NECESSARY TO COMPLETE THE RETURN HAS NOT BEEN ASSEMBLED; CONSEQUENTLY, AN EXTENSION OF TIME TO FILE IS NEEDED. THIS ADDITIONAL TIME WILL ENABLE US TO FILE A COMPLETE AND ACCURATE RETURN.

**Anderson Foundation
YEAR 2005**

	<u>STATUS</u>	<u>PURPOSE</u>	<u>RELATIONSHIP</u>	<u>2005 DONATION</u>
CATO Institute 1000 Massachusetts Ave., NW Washington, DC 20001	Public	Education	None	25,000
Children's Scholarship Fund 7 West 57 th Street New York, NY 10019-3404	Public	Education	None	250,000
Columbia Business School 820 Uris Hall, 3022 Broadway New York, NY 10027	Public	Education	None	20,000
Commonweal Foundation 10770 Columbia Pike, Ste 100 Silver Spring, MD 20901	Public	Education	None	40,000
Community Answers 101 West Putnam Avenue Greenwich, CT 06830	Public	Education	None	10,000
Endowment for Inner-City Educ 1011 First Avenue, Ste 1400 New York, NY 10022	Public	Education	None	25,000
George Washington's Mount Vernon P O Box 240 Mount Vernon, VA 22121	Public	Education	None	25,000
Grandview Heights T.C. Bldg Fund P O Box 12234 Columbus, OH 43212	Public	Education	None	225,000
Heard Museum 2301 N Central Avenue Phoenix, AZ 85004	Public	Education	None	4,400

Hoover Institution Stanford University Stanford, CA 94305	Public	Education	None	100,000
Kappa Delta Scholarship Fd 3205 Players Lane Memphis, TN 38125	Public	Education	None	25,000
Miami Univ. School of Bus. 104 Laws Hall Oxford, OH 45056	Public	Education	None	102,769
Miami University Deans Scholarship Bus. Discr. Fd. Same as above	Public	Education	None	100,000
Miami University Anderson Lecture Series Fd Same as above	Public	Education	None	500,000
Milton & Rose D. Friedman Fdn One American Square Box 82078 Indianapolis, IN 46282	Public	Education	None	198,000
National Academies Bruce Alberts Sc. Fund 2101 Constitution Ave., NW Washington, DC 20418	Public	Medicine	None	10,000
National Academies Intern Program Same as above	Public	Medicine	None	67,400
National Academies Same as above	Public	Medicine	None	20,000
National Ctr for Policy Analysis 12655 N. Central Expy, Ste 720 Dallas, TX 75243	Public	Health, Educ Welfare	None	40,000
N. Greenwich Congreg. Church 606 Riversville Road Greenwich, CT 06831	Public	Religious	None	10,000

Pathways, Inc. 175 Milbank Avenue Greenwich, CT 06830	Public	Mental Illness	None	50,000
Public Educ. Partnership, Inc. P O Box 3377 Carefree, AZ 85377	Public	Education	None	10,000
St. Anthony on the Desert Episcopal Church Adm. Fisher Mem. Bldg Fund 12990 East Shea Blvd. Scottsdale, AZ 85259	Public	Religious	None	25,000
St. Michael's Church 469 North Street Greenwich, CT 06830	Public	Religious	None	25,000
Student Sponsor Partners 21 East 40th Street, Ste 1601 New York, NY 10016	Public	Education	None	25,000
Vanguard Charitable Endowmt Fund P O Box 3075 Southeastern, PA 19398-9917	Public	Health, Educ Welfare	None	<u>35,431</u> 1,968,000

o If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

o If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II	Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.	
Type or print. File by the extended due date for filing the return. See instructions	Name of Exempt Organization ROSE-MARIE AND JACK R. ANDERSON FOUNDATION	Employer identification number 75-2542403
	Number, street, and room or suite no. If a P.O. box, see instructions 16475 DALLAS PARKWAY, NO. 735	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions ADDISON, TX 75001	*

Check type of return to be filed (File a separate application for each return)

☐ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☒ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of **NEIL R. ANDERSON**

Telephone No. **972-248-7350**

FAX No. ☐

• If the organization does **not** have an office or place of business in the United States, check this box ☐

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the **whole** group, check this box ☐. If it is for **part** of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2006**

5 For calendar year **2005**, or other tax year beginning _____ and ending _____

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

SEE STATEMENT 16

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ **166,000.**

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ **166,000.**

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **0.**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐

Title ☐

Date ☐

Notice to Applicant - To Be Completed by the IRS

☐ We **have** approved this application. Please attach this form to the organization's return

☐ We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return

☐ We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period

☐ We **cannot consider** this application because it was filed after the extended due date of the return for which an extension was requested

☐ Other _____

By: _____

Director

Date

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	Name WEAVER AND TIDWELL, L.L.P.
	Number and street (include suite, room, or apt. no.) or a P.O. box number 12221 MERIT DRIVE, SUITE 1400
	City or town, province or state, and country (including postal or ZIP code) DALLAS, TEXAS 75251

523832
05-01-05